

9/15/86

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C AD 0 04 4 398 7 2		Manifest Document No.		2. Page 1 of 2		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address ARWOOD COMPANY 11126 Greenstone Ave., Santa Fe Springs, CA 90670						A. State Manifest Document Number 86534636							
4. Generator's Phone (213) 946-4381						B. State Generator's ID CAD004439872							
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES				6. US EPA ID Number C AD 0 04 22 45 0 01		C. State Transporter's ID 701737							
7. Transporter 2 Company Name						D. Transporter's Phone 213/698-0991							
9. Designated Facility Name and Site Address Omega Recovery Services 12504 E. Whittier Blvd. Whittier, CA 90602						G. State Facility's ID CAD042245001							
10. US EPA ID Number C AD 0 04 22 45 0 01						H. Facility's Phone 213/698-0991							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Hazardous Waste, Liquid N.O.S. ORM-E NA 9189 (Fluorosolv TF)						0 03 DM		284		G		211	
b. Waste 1.1.1 Trichloroethane ORM-A UN 2831						0 01 DM		50		G		211	
Waste 1.1.1 Trichloroethane						0 01 DM		50		G		211	
d. Waste Alcohol, N.O.S. UN 1987 Flammable Liquid						0 01 DM		50		G			
J. Additional Descriptions for Materials Listed Above AFRONT TF ACETONE FOIL B. TRICHLOROETHANE OIL MIXED ALCOHOL						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.													
Printed/Typed Name FRANK LAWRENCE R. NORTON						Signature FRANK NORTON				Month Day Year 10/1/986			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name ISAAC Woods Jr						Signature Isaac Woods Jr				Month Day Year 10/9/986			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature				Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Frank Ford													
Signature Frank Ford						Month Day Year 10/9/986							

DHS 8022 A (11/85)
(EPA 8700-22)White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To P.O. Box 3000 Sacramento CA 95812

04/25/2000 "ORIGINAL MANIFEST COPY"